

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BF	897	08-28-01
RESPONSE FORMALITY REVIEW	Tequest	995	10-11-01

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	3/04
10/11/04	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions.  
staple additional sheet here

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09/9204/10

10/11/01  
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